

## Fill in this information to identify your case:

Debtor 1	<b>John William Chvilicek</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Gayle Marie Chvilicek</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF MONTANA		
Case number (if known)	19-60131		

☐ Check if this is an amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

## Part 1: Summarize Your Assets

		Your assets Value of what you own
1.	<b>Schedule A/B: Property</b> (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 565,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 99,483.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 664,483.00

## Part 2: Summarize Your Liabilities

		Your liabilities Amount you owe
2.	<b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 357,142.00
3.	<b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ 622,527.62
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	\$ 37,325.43
Your total liabilities		\$ 1,016,995.05

## Part 3: Summarize Your Income and Expenses

4.	<b>Schedule I: Your Income</b> (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ 4,436.16
5.	<b>Schedule J: Your Expenses</b> (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ 4,421.00

## Part 4: Answer These Questions for Administrative and Statistical Records

## 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes

## 7. What kind of debt do you have?

☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. *Check this box* and submit this form to the court with your other schedules.

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8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ **4,135.63**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

	Total claim
<b>From Part 4 on Schedule E/F, copy the following:</b>	
9a. Domestic support obligations (Copy line 6a.)	\$ <b>0.00</b>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <b>622,527.62</b>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <b>0.00</b>
9d. Student loans. (Copy line 6f.)	\$ <b>0.00</b>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <b>0.00</b>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <b>0.00</b>
9g. <b>Total.</b> Add lines 9a through 9f.	\$ <b>622,527.62</b>

**Fill in this information to identify your case and this filing:**Debtor 1 **John William Chvilicek**

First Name Middle Name Last Name

Debtor 2 **Gayle Marie Chvilicek**

(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF MONTANA**Case number **19-60131**☐ Check if this is an amended filing**Official Form 106A/B****Schedule A/B: Property**

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In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**☐ No. Go to Part 2.☒ Yes. Where is the property?

1.1

**113 Swan Ridge CT**

Street address, if available, or other description

**Kalispell MT 59901-0000**

City State ZIP Code

**Flathead**

County

**What is the property?** Check all that apply

- ☒ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☐ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another \_\_\_\_\_

Other information you wish to add about this item, such as local property identification number:

**Declaration of Homestead recorded on February 20, 2019 in Flathead County.**

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?  
**\$565,000.00**

Current value of the portion you own?  
**\$565,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**JTWROS**

☐ Check if this is community property (see instructions)

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>****\$565,000.00****Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

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 Debtor 2 **Gayle Marie Chvilicek**

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**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

☐ No

☒ Yes

3.1 Make: **Ford**  
 Model: **Explorer**  
 Year: **2012**  
 Approximate mileage: **98,000**  
 Other information:

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property**  
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

**\$11,382.00**

**\$11,382.00**

3.2 Make: **Ford**  
 Model: **Explorer**  
 Year: **2013**  
 Approximate mileage: **52,000**  
 Other information:

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property**  
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

**\$15,823.00**

**\$15,823.00**

3.3 Make: **Ford**  
 Model: **F150**  
 Year: **2005**  
 Approximate mileage: **225,000**  
 Other information:

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property**  
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

**\$1,222.00**

**\$1,222.00**

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

*Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*

☐ No

☒ Yes

4.1 Make: **Glastron**  
 Model: **V212**  
 Year: **1975**  
 Other information:

**Who has an interest in the property?** Check one

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property**  
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**

**Current value of the portion you own?**

**\$750.00**

**\$750.00**

**5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>**

**\$29,177.00**

**Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

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**6. Household goods and furnishings**

*Examples:* Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

Living Room Furniture	\$300.00
Bedroom Furniture	\$200.00
Dining Room Furniture	\$300.00
Kitchen Furniture	\$25.00
Kitchen Appliances	\$450.00
Everyday Dishes	\$50.00
Lawn Mower, Gardening Tools & Patio Furniture	\$850.00
Hand Tools	\$450.00
Power Tools	\$50.00
Whirlpool Dryer	\$200.00

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

Cell Phones - 2 Verizon Plan	\$250.00
Televisions - 3	\$250.00
Radios/ Stereos/ MP3 Players - 2	\$100.00
VCR/ DVD Players	\$30.00
Computers - 2	\$200.00
Cameras/ Video Equipment	\$50.00

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

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**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe.....

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

**Binoculars**

**\$20.00**

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe.....

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

**Clothing - John**

**\$100.00**

**Clothing - Gayle**

**\$300.00**

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☒ Yes. Describe.....

**Everyday Jewelry**

**\$50.00**

**Watch**

**\$20.00**

**Wedding Rings**

**\$500.00**

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

☐ No

☒ Yes. Describe.....

**Cat**

**\$0.00**

**14. Any other personal and household items you did not already list, including any health aids you did not list**

☒ No

☐ Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

**\$4,745.00**

**Part 4: Describe Your Financial Assets**

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

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Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes.....

**Cash on hand  
- estimated**

**\$100.00**

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes.....

Institution name:

	17.1.	Joint checking account #7130 - estimated	<u>Glacier Bank</u>	<u>\$280.00</u>
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	17.2.	Joint checking account #9847 - estimated	<u>Glacier Bank</u>	<u>\$25.00</u>
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	17.3.	Gayle's checking account #9126 - estimated	<u>Glacier Bank</u>	<u>\$156.00</u>
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**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

☐ No

☒ Yes.....

Institution or issuer name:

		<u>Edward Jones Mutual Fund - consumed in Chapter 13 case (\$1,600)</u>	<u>\$0.00</u>
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**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

☒ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☐ No

☒ Yes. List each account separately.

Type of account:

Institution name:

		Gayle's retirement account - estimated	<u>NRECA (retirement contribution required)</u>	<u>\$65,000.00</u>
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Debtor 1 **John William Chvilicek**  
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**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes. .... Institution name or individual:

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes..... Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☐ No

☒ Yes. Give specific information about them...

**1986 Expired patent on newborn pillow**

**Indeterminate**

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

☐ No

☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

**Potential Tax Refunds and Credits**

**Indeterminate**

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information..

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:



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**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- ☒ No  
☐ Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

- ☒ No  
☐ Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- ☒ No  
☐ Yes. Describe each claim.....

**35. Any financial assets you did not already list**

- ☒ No  
☐ Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

**\$65,561.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

- ☒ No. Go to Part 6.  
☐ Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**

If you own or have an interest in farmland, list it in Part 1.

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- ☒ No. Go to Part 7.  
☐ Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

*Examples:* Season tickets, country club membership

- ☒ No  
☐ Yes. Give specific information.....

**54. Add the dollar value of all of your entries from Part 7. Write that number here .....**

**\$0.00**

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**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....		<b>\$565,000.00</b>
56. Part 2: Total vehicles, line 5	<b>\$29,177.00</b>	
57. Part 3: Total personal and household items, line 15	<b>\$4,745.00</b>	
58. Part 4: Total financial assets, line 36	<b>\$65,561.00</b>	
59. Part 5: Total business-related property, line 45	<b>\$0.00</b>	
60. Part 6: Total farm- and fishing-related property, line 52	<b>\$0.00</b>	
61. Part 7: Total other property not listed, line 54	<b>\$0.00</b>	
	+	
62. Total personal property. Add lines 56 through 61...	<b>\$99,483.00</b>	Copy personal property total <b>\$99,483.00</b>
63. Total of all property on Schedule A/B. Add line 55 + line 62		<b>\$664,483.00</b>

**Fill in this information to identify your case:**

Debtor 1	<b>John William Chvilicek</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Gayle Marie Chvilicek</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF MONTANA		
Case number (if known)	19-60131		

☐ Check if this is an amended filing
**Official Form 106C****Schedule C: The Property You Claim as Exempt**

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Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
113 Swan Ridge CT Kalispell, MT 59901 Flathead County Declaration of Homestead recorded on February 20, 2019 in Flathead County. Line from <i>Schedule A/B</i> : 1.1	\$565,000.00	<input checked="" type="checkbox"/> \$250,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. §§ 70-32-104, 25-13-615
2012 Ford Explorer 98,000 miles Line from <i>Schedule A/B</i> : 3.1	\$11,382.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(2)
2005 Ford F150 225,000 miles Line from <i>Schedule A/B</i> : 3.3	\$1,222.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(2)
1975 Glastron V212 Line from <i>Schedule A/B</i> : 4.1	\$750.00	<input checked="" type="checkbox"/> \$600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
Living Room Furniture Line from <i>Schedule A/B</i> : 6.1	\$300.00	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Bedroom Furniture</b> Line from Schedule A/B: <b>6.2</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Dining Room Furniture</b> Line from Schedule A/B: <b>6.3</b>	<b>\$300.00</b>	<input checked="" type="checkbox"/> <b>\$300.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Kitchen Furniture</b> Line from Schedule A/B: <b>6.4</b>	<b>\$25.00</b>	<input checked="" type="checkbox"/> <b>\$25.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Kitchen Appliances</b> Line from Schedule A/B: <b>6.5</b>	<b>\$450.00</b>	<input checked="" type="checkbox"/> <b>\$450.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Everyday Dishes</b> Line from Schedule A/B: <b>6.6</b>	<b>\$50.00</b>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Lawn Mower, Gardening Tools &amp; Patio Furniture</b> Line from Schedule A/B: <b>6.7</b>	<b>\$850.00</b>	<input checked="" type="checkbox"/> <b>\$850.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Hand Tools</b> Line from Schedule A/B: <b>6.8</b>	<b>\$450.00</b>	<input checked="" type="checkbox"/> <b>\$450.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Power Tools</b> Line from Schedule A/B: <b>6.9</b>	<b>\$50.00</b>	<input checked="" type="checkbox"/> <b>\$50.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Whirlpool Dryer</b> Line from Schedule A/B: <b>6.10</b>	<b>\$200.00</b>	<input checked="" type="checkbox"/> <b>\$200.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Cell Phones - 2 Verizon Plan</b> Line from Schedule A/B: <b>7.1</b>	<b>\$250.00</b>	<input checked="" type="checkbox"/> <b>\$250.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Televisions - 3</b> Line from Schedule A/B: <b>7.2</b>	<b>\$250.00</b>	<input checked="" type="checkbox"/> <b>\$250.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Radios/ Stereos/ MP3 Players - 2</b> Line from Schedule A/B: 7.3	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>VCR/ DVD Players</b> Line from Schedule A/B: 7.4	<u>\$30.00</u>	<input checked="" type="checkbox"/> <u>\$30.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Computers - 2</b> Line from Schedule A/B: 7.5	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Cameras/ Video Equipment</b> Line from Schedule A/B: 7.6	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Binoculars</b> Line from Schedule A/B: 9.1	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Clothing - John</b> Line from Schedule A/B: 11.1	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Clothing - Gayle</b> Line from Schedule A/B: 11.2	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Everyday Jewelry</b> Line from Schedule A/B: 12.1	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Watch</b> Line from Schedule A/B: 12.2	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Wedding Rings</b> Line from Schedule A/B: 12.3	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)
<b>Cat</b> Line from Schedule A/B: 13.1	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Mont. Code Ann. § 25-13-609(1)

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Cash on hand - estimated</b> Line from Schedule A/B: <b>16.1</b>	<b>\$100.00</b>	<input checked="" type="checkbox"/> <b>75%</b>  <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mont. Code Ann. § 25-13-614</b>
<b>Joint checking account #7130 - estimated: Glacier Bank</b> Line from Schedule A/B: <b>17.1</b>	<b>\$280.00</b>	<input checked="" type="checkbox"/> <b>75%</b>  <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mont. Code Ann. § 25-13-614</b>
<b>Joint checking account #9847 - estimated: Glacier Bank</b> Line from Schedule A/B: <b>17.2</b>	<b>\$25.00</b>	<input checked="" type="checkbox"/> <b>75%</b>  <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mont. Code Ann. § 25-13-614</b>
<b>Gayle's checking account #9126 - estimated: Glacier Bank</b> Line from Schedule A/B: <b>17.3</b>	<b>\$156.00</b>	<input checked="" type="checkbox"/> <b>75%</b>  <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mont. Code Ann. § 25-13-614</b>
<b>Gayle's retirement account - estimated: NRECA (retirement contribution required)</b> Line from Schedule A/B: <b>21.1</b>	<b>\$65,000.00</b>	<input checked="" type="checkbox"/> <b>100%</b>  <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mont. Code Ann. § 25-13-608(1)(e)</b>

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

☐ No

☒ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☒ No

☐ Yes

**Fill in this information to identify your case:**

Debtor 1	<b>John William Chvilicek</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Gayle Marie Chvilicek</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF MONTANA</u>			
Case number (if known)	<u>19-60131</u>		

☐ Check if this is an amended filing

## Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
<b>2.1 Select Portfolio Servicing, Inc</b> <small>Creditor's Name</small>  <b>Attn: Bankruptcy PO Box 65250 Salt Lake City, UT 84165</b> <small>Number, Street, City, State &amp; Zip Code</small>	<b>\$314,991.00</b>	<b>\$565,000.00</b>	<b>\$0.00</b>
<b>Describe the property that secures the claim:</b> <b>113 Swan Ridge CT Kalispell, MT 59901 Flathead County Declaration of Homestead recorded on February 20, 2019 in Flathead County.</b>			
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____			
<b>Who owes the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
<b>Date debt was incurred</b> <u>2004</u>		<b>Last 4 digits of account number</b> <u>3717</u>	

Debtor 1 **John William Chvilicek**Case number (if known) **19-60131**

First Name Middle Name Last Name

Debtor 2 **Gayle Marie Chvilicek**

First Name Middle Name Last Name

**2.2 Wells Fargo Bank, NA**

Creditor's Name

**dba Wells Fargo Auto  
PO Box 130000  
Raleigh, NC 27605**

Number, Street, City, State &amp; Zip Code

Describe the property that secures the claim:

**\$20,237.00****\$15,823.00****\$4,414.00****2013 Ford Explorer 52,000 miles**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debtOpened  
12/16 LastDate debt was incurred **Active 01/19**Last 4 digits of account number **5575****2.3 Wells Fargo Bank, NA**

Creditor's Name

**dba Wells Fargo Auto  
PO Box 130000  
Raleigh, NC 27605**

Number, Street, City, State &amp; Zip Code

Describe the property that secures the claim:

**\$21,914.00****\$11,382.00****\$10,532.00****2012 Ford Explorer 98,000 miles**

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☒ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset)

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a community debtOpened  
04/17 LastDate debt was incurred **Active 01/19**Last 4 digits of account number **7321**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$357,142.00**

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

**\$357,142.00****Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.



Name, Number, Street, City, State &amp; Zip Code

**Jason J. Henderson  
38 2nd Ave East  
Dickinson, ND 58601**On which line in Part 1 did you enter the creditor? **2.1**

Last 4 digits of account number \_\_\_\_



**Fill in this information to identify your case:**

Debtor 1	<b>John William Chvilicek</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Gayle Marie Chvilicek</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF MONTANA</u>			
Case number (if known)	<u>19-60131</u>		

☐ Check if this is an amended filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims against you?**
☐ No. Go to Part 2.

☒ Yes.
**2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>IRS</b> Priority Creditor's Name <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b> Number Street City State Zip Code	<b>\$622,527.6</b>	<b>2</b>	<b>Unknown</b>
	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			<b>Unknown</b>
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Unsecured Debt**

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

2.2	<b>MT Dept of Revenue</b> Priority Creditor's Name <b>Bankruptcy Unit</b> <b>PO Box 7701</b> <b>Helena, MT 59604-7701</b> Number Street City State Zip Code	Last 4 digits of account number _____ <b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of PRIORITY unsecured claim:</b> <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____		
<b>Notice Only</b>				

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☒ Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1	<b>Absolute Resolutions Investments</b> Nonpriority Creditor's Name <b>c/o Absolute Resolutions Corp.</b> <b>8000 Norman Center Drive, Ste. 350</b> <b>Bloomington, MN 55437</b> Number Street City State Zip Code	Last 4 digits of account number <b>9262</b>	<b>Total claim</b> <b>\$0.00</b>
	<b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card debt</b>		

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.2	<b>Bank Of America</b> Nonpriority Creditor's Name <b>4909 Savarese Circle</b> <b>FI1-908-01-50</b> <b>Tampa, FL 33634</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>6706</u> <b>\$786.00</b>  <b>When was the debt incurred?</b> <u>Opened 08/17 Last Active 11/17</u>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card debt</u>
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4.3	<b>Capital One</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 30285</b> <b>Salt Lake City, UT 84130</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>9430</u> <b>\$2,321.00</b>  <b>When was the debt incurred?</b> <u>Opened 09/15 Last Active 11/17</u>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card debt</u>
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4.4	<b>Capital One Bank</b> Nonpriority Creditor's Name <b>c/o Larsen Law Firm, PLLP</b> <b>Attn: Dirk Larsen, Esq.</b> <b>PO Box 1692</b> <b>Great Falls, MT 59403</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>                    </u> <b>\$1,944.23</b>  <b>When was the debt incurred?</b> <u>2009</u>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CV-2009-0976, DV 09-1497B</u>
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Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.5	<b>Capital One Bank (USA) NA</b> Nonpriority Creditor's Name <b>c/o Rausch Strum</b> <b>Attn: Joel Boon, Esq.</b> <b>3209 W 76th Street, Suite 301</b> <b>Minneapolis, MN 55435</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>\$2,321.42</b>  <b>When was the debt incurred?</b> <b>2018</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>DV 18-1215</b>	
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4.6	<b>Capital One Bank (USA), N.A.</b> Nonpriority Creditor's Name <b>by American InfoSource as agent</b> <b>4515 N Santa Fe Ave</b> <b>Oklahoma City, OK 73118</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>2462</b> <b>\$1,448.08</b>  <b>When was the debt incurred?</b> <b>Opened 05/16 Last Active 11/17</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card debt</b>	
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4.7	<b>CB1 Collections Inc</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 31213</b> <b>Billings, MT 59107</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>3942</b> <b>\$184.00</b>  <b>When was the debt incurred?</b> <b>Opened 02/13</b>  <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collecting for Trugreen Chemlawn</b>	
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Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.8	<b>CB1, Inc.</b> Nonpriority Creditor's Name <b>dba CBM Collections</b> <b>PO Box 7429</b> <b>Missoula, MT 59807</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>\$0.00</b>  <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Potential Collection Account</b>
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4.9	<b>CBS</b> Nonpriority Creditor's Name <b>PO Box 7339</b> <b>Missoula, MT 59807</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <b>2021</b> <b>\$135.00</b>  <b>When was the debt incurred?</b> <b>Opened 12/13 Last Active 02/13</b>  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collecting for Glacier Regional Pathology Bil</b>
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4.1 0	<b>CBS</b> Nonpriority Creditor's Name <b>PO Box 7339</b> <b>Missoula, MT 59807</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> _____ <b>\$899.52</b>  <b>When was the debt incurred?</b> <b>2013</b>  <b>As of the date you file, the claim is:</b> Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>CV-2012-2853, DV 13-222D</b>
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Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.1 1	<b>Centron Services</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>PO Box 875</b> <b>Helena, MT 59624</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>Multiple</u> <b>\$2,553.00</b> <b>When was the debt incurred?</b> <u>2017- 2018</u> <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Collecting for The Health Center, Kalispell Regional, &amp; KRHPN Family HE</u>
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4.1 2	<b>Centron Services</b> Nonpriority Creditor's Name <b>Attn: Julia Swingley, Esq.</b> <b>PO Box 534</b> <b>Helena, MT 59624</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>                    </u> <b>\$472.00</b> <b>When was the debt incurred?</b> <u>2012</u> <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CV-2012-1283</u>
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4.1 3	<b>Chase Bank USA, N.A.</b> Nonpriority Creditor's Name <b>c/o Robertson, Anschutz &amp; Schneid</b> <b>6409 Congress Avenue, Suite 100</b> <b>Boca Raton, FL 33487</b> Number Street City State Zip Code <b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Last 4 digits of account number</b> <u>8338</u> <b>\$3,855.00</b> <b>When was the debt incurred?</b> <u>Opened 02/16 Last Active 12/17</u> <b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card debt</u>
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Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.1  
4

**Collection Center**

Nonpriority Creditor's Name

**1308 12th Ave S**

**PO Box 6975**

**Great Falls, MT 59406**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **5724**

**\$565.61**

When was the debt incurred? **2015**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collecting for Kalispell Regional Healthcare**

4.1  
5

**CPI**

Nonpriority Creditor's Name

**3104 W Broadway St**

**Missoula, MT 59808-1614**

Number Street City State Zip Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☒ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Potential Collection Account**

4.1  
6

**Credit Associates Inc**

Nonpriority Creditor's Name

**1308 12th Ave S**

**PO Box 6099**

**Great Falls, MT 59406**

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No

☐ Yes

Last 4 digits of account number **5724**

**\$154.00**

When was the debt incurred? **2014**

As of the date you file, the claim is: Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Collecting for Traders Dispatch**

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.1  
7

**Depratu Ford Sales**

Nonpriority Creditor's Name

**6331 US Highway 93 South  
Whitefish, MT 59937**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$600.00**

When was the debt incurred? **3/14/2002**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Small Claims Judgment: SC02037**

4.1  
8

**Discover Bank Discover Products Inc**

Nonpriority Creditor's Name

**PO Box 3025  
New Albany, OH 43054-3025**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **6524**

**\$654.24**

When was the debt incurred? **2016**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Credit Card debt**

4.1  
9

**Document Management Services**

Nonpriority Creditor's Name

**9187 Clairemont Mesa Blvd.  
San Diego, CA 92123**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify **Debt Repayment Plan**



Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.2  
0

**Electroman Electric LTD**

Last 4 digits of account number

**\$9,635.00**

Nonpriority Creditor's Name

**c/o Angela LeDuc  
 Rocky Mountain Law Partners, PC  
 PO Box 1758  
 Kalispell, MT 59903**

When was the debt incurred?

**2018**

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Contingent

☐ Debtor 2 only

☐ Unliquidated

☐ Debtor 1 and Debtor 2 only

☐ Disputed

☒ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify **CV-2018-0180, DV 18-385D**

4.2  
1

**LendingClub Corporation**

Last 4 digits of account number

**2519**

**\$5,153.00**

Nonpriority Creditor's Name

**595 Market Street, Suite 200  
 Attn Bankruptcy Dept  
 San Francisco, CA 94105**

When was the debt incurred?

**Opened 02/17 Last Active  
 12/24/18**

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Contingent

☒ Debtor 2 only

☐ Unliquidated

☐ Debtor 1 and Debtor 2 only

☐ Disputed

☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify **Unsecured Loan**

4.2  
2

**Leroy Turner dba Leroy's Plumbing**

Last 4 digits of account number

**Indeterminate**

Nonpriority Creditor's Name

**& Heating, Inc.  
 c/o Buckwalter Law Firm, PLLC  
 100 Financial Drive, Suite 200  
 Kalispell, MT 59901**

When was the debt incurred?

**2013**

Number Street City State Zip Code

As of the date you file, the claim is: Check all that apply

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Contingent

☐ Debtor 2 only

☐ Unliquidated

☐ Debtor 1 and Debtor 2 only

☐ Disputed

☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

☐ Check if this claim is for a community debt

☐ Student loans

Is the claim subject to offset?

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☒ No

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

☒ Other. Specify **DV 13-095(D)**

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.2  
3

**LVNV Funding LLC**

Nonpriority Creditor's Name

**c/o Resurgent Capital Services  
 PO Box 10497  
 Greenville, SC 29603**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☒ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$1,435.00**

When was the debt incurred? **2/8/2012**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Judgment CV-2011-1636**

4.2  
4

**Merrick Bank**

Nonpriority Creditor's Name

**Resurgent Capital Services  
 PO Box 10368  
 Greenville, SC 29603-0368**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**0734**

**\$1,531.00**

When was the debt incurred? **Opened 03/16 Last Active 11/17**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Credit Card debt**

4.2  
5

**N.W. Collectors**

Nonpriority Creditor's Name

**PO Box 2898  
 Missoula, MT 59806**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Potential Collection Account**

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

4.2  
6

**Parkside Financial Credit Union**

Nonpriority Creditor's Name

**1300 Baker Ave  
Whitefish, MT 59937**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **0015**

**\$471.00**

When was the debt incurred? **Opened 11/14 Last Active 09/17**

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Deposit Related**

4.2  
7

**Verizon by American InfoSource**

Nonpriority Creditor's Name

**4515 N Santa Fe Ave  
Oklahoma City, OK 73118**

Number Street City State Zip Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☒ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another  
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No  
☐ Yes

Last 4 digits of account number **0001**

**\$207.33**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
**Type of NONPRIORITY unsecured claim:**  
☐ Student loans  
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
☐ Debts to pension or profit-sharing plans, and other similar debts  
☒ Other. Specify **Goods & Services**

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**Bureaus Investment Group Portfolio  
No 15 LLC  
c/o PRA Receivables MGMT, LLC  
PO Box 41021  
Norfolk, VA 23541**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Bureaus Investment Group Portfolio  
No 15 LLC  
c/o PRA Receivables MGMT, LLC  
PO Box 41021  
Norfolk, VA 23541**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Capital One Bank (USA N.A. by  
American InfoSource as agent  
4515 N Santa Fe Ave**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims  
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

**Oklahoma City, OK 73118**

Last 4 digits of account number

Name and Address

**Midland Credit MGMT, Inc. as agent  
 for Midland Funding, LLC  
 PO Box 2011  
 Warren, MI 48090**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Midland Funding  
 2365 Northside Dr Ste 300  
 San Diego, CA 92108**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**The Bureaus Inc  
 Attn: Bankruptcy  
 650 Dundee Rd, Ste 370  
 Northbrook, IL 60062**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.6** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**The Bureaus Inc  
 Attn: Bankruptcy  
 650 Dundee Rd, Ste 370  
 Northbrook, IL 60062**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.3** of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	\$ <u>622,527.62</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ <u>0.00</u>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ <u>622,527.62</u>
Total claims from Part 2	6f. Student loans	6f.	\$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ <u>37,325.43</u>
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ <u>37,325.43</u>

Fill in this information to identify your case:

Debtor 1 John William ChvilicekDebtor 2 Gayle Marie Chvilicek  
(Spouse, if filing)United States Bankruptcy Court for the: DISTRICT OF MONTANACase number 19-60131  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY**Official Form 106I****Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment****1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

**Employment status**

- ☐ Employed
- ☒ Not employed

**Occupation****Employer's name****Employer's address****Debtor 1****Debtor 2 or non-filing spouse**☒ Employed☐ Not employed**GIS Specialist****Flathead Electric Co-op****2510 US-2 East  
Kalispell, MT 59901****How long employed there?****16 years****Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

**2. List monthly gross wages, salary, and commissions** (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

**3. Estimate and list monthly overtime pay.**

**4. Calculate gross income.** Add line 2 + line 3.

**For Debtor 1****For Debtor 2 or  
non-filing spouse**2. \$ **0.00** \$ **4,050.80**3. +\$ **0.00** +\$ **0.00**4. \$ **0.00** \$ **4,050.80**

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ <b>0.00</b>	\$ <b>4,050.80</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <b>0.00</b>	\$ <b>817.40</b>
5b. Mandatory contributions for retirement plans	5b. \$ <b>0.00</b>	\$ <b>0.00</b>
5c. Voluntary contributions for retirement plans	5c. \$ <b>0.00</b>	\$ <b>243.06</b>
5d. Required repayments of retirement fund loans	5d. \$ <b>0.00</b>	\$ <b>0.00</b>
5e. Insurance	5e. \$ <b>0.00</b>	\$ <b>270.49</b>
5f. Domestic support obligations	5f. \$ <b>0.00</b>	\$ <b>0.00</b>
5g. Union dues	5g. \$ <b>0.00</b>	\$ <b>27.63</b>
5h. Other deductions. Specify: <u>Retirement Loan repayment</u>	5h.+ \$ <b>0.00</b>	+ \$ <b>353.64</b>
Union %	\$ <b>0.00</b>	\$ <b>60.75</b>
Untd Way	\$ <b>0.00</b>	\$ <b>21.67</b>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <b>0.00</b>	\$ <b>1,794.64</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <b>0.00</b>	\$ <b>2,256.16</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <b>1,100.00</b>	\$ <b>0.00</b>
8b. Interest and dividends	8b. \$ <b>0.00</b>	\$ <b>0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <b>0.00</b>	\$ <b>0.00</b>
8d. Unemployment compensation	8d. \$ <b>0.00</b>	\$ <b>0.00</b>
8e. Social Security	8e. \$ <b>1,080.00</b>	\$ <b>0.00</b>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ <b>0.00</b>	\$ <b>0.00</b>
8g. Pension or retirement income	8g. \$ <b>0.00</b>	\$ <b>0.00</b>
8h. Other monthly income. Specify:	8h.+ \$ <b>0.00</b>	+ \$ <b>0.00</b>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <b>2,180.00</b>	\$ <b>0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <b>2,180.00</b>	+ \$ <b>2,256.16</b> = \$ <b>4,436.16</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	11. +\$ <b>0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related Data, if it applies	12. \$ <b>4,436.16</b> Combined monthly income	
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1 John William Chvilicek

Debtor 2 Gayle Marie Chvilicek  
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF MONTANA

Case number 19-60131  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## Part 1: Describe Your Household

## 1. Is this a joint case?

☐ No. Go to line 2.☒ Yes. Does Debtor 2 live in a separate household?☒ No☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

## Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

## 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,675.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 65.00

## 5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

6. <b>Utilities:</b>		
6a. Electricity, heat, natural gas	6a. \$	<b>250.00</b>
6b. Water, sewer, garbage collection	6b. \$	<b>0.00</b>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	<b>218.00</b>
6d. Other. Specify: _____	6d. \$	<b>0.00</b>
7. <b>Food and housekeeping supplies</b>	7. \$	<b>425.00</b>
8. <b>Childcare and children's education costs</b>	8. \$	<b>0.00</b>
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$	<b>45.00</b>
10. <b>Personal care products and services</b>	10. \$	<b>69.00</b>
11. <b>Medical and dental expenses</b>	11. \$	<b>52.00</b>
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	<b>50.00</b>
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$	<b>0.00</b>
14. <b>Charitable contributions and religious donations</b>	14. \$	<b>20.00</b>
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	<b>0.00</b>
15b. Health insurance	15b. \$	<b>0.00</b>
15c. Vehicle insurance	15c. \$	<b>165.00</b>
15d. Other insurance. Specify: _____	15d. \$	<b>0.00</b>
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <b>Vehicle Taxes or Land Taxes</b>		
	16. \$	<b>20.00</b>
17. <b>Installment or lease payments:</b>		
17a. Car payments for Vehicle 1	17a. \$	<b>420.00</b>
17b. Car payments for Vehicle 2	17b. \$	<b>423.00</b>
17c. Other. Specify: _____	17c. \$	<b>0.00</b>
17d. Other. Specify: _____	17d. \$	<b>0.00</b>
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>		
18. \$		<b>0.00</b>
19. <b>Other payments you make to support others who do not live with you.</b>		
19. \$		<b>0.00</b>
Specify: _____		
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$	<b>0.00</b>
20b. Real estate taxes	20b. \$	<b>0.00</b>
20c. Property, homeowner's, or renter's insurance	20c. \$	<b>0.00</b>
20d. Maintenance, repair, and upkeep expenses	20d. \$	<b>0.00</b>
20e. Homeowner's association or condominium dues	20e. \$	<b>0.00</b>
21. <b>Other:</b> Specify: <b>Attorney Fees - Morgan Pierce (monthly payment)</b>	21. +\$	<b>524.00</b>
22. <b>Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$	<b>4,421.00</b>
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	<b>4,421.00</b>
23. <b>Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$	<b>4,436.16</b>
23b. Copy your monthly expenses from line 22c above.	23b. -\$	<b>4,421.00</b>
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	<b>15.16</b>
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain here: _____		



**Fill in this information to identify your case:**

Debtor 1 **John William Chvilicek**  
First Name Middle Name Last Name

Debtor 2 **Gayle Marie Chvilicek**  
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF MONTANA

Case number **19-60131**  
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ John William Chvilicek

**John William Chvilicek**  
 Signature of Debtor 1

Date June 15, 2019

X /s/ Gayle Marie Chvilicek

**Gayle Marie Chvilicek**  
 Signature of Debtor 2

Date June 15, 2019

**Fill in this information to identify your case:**

Debtor 1 **John William Chvilicek**  
 First Name Middle Name Last Name

Debtor 2 **Gayle Marie Chvilicek**  
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF MONTANA

Case number **19-60131**  
 (if known)

☐ Check if this is an amended filing

## Official Form 108

**Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- ☒ creditors have claims secured by your property, or
- ☒ you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Have Secured Claims**

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <b>Select Portfolio Servicing, Inc</b>  Description of property securing debt: <b>113 Swan Ridge CT Kalispell, MT 59901 Flathead County Declaration of Homestead recorded on February 20, 2019 in Flathead County.</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes
Creditor's name: <b>Wells Fargo Bank, NA</b>  Description of property securing debt: <b>2013 Ford Explorer 52,000 miles</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes
Creditor's name: <b>Wells Fargo Bank, NA</b>  Description of property securing debt: <b>2012 Ford Explorer 98,000 miles</b>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	<input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes

Debtor 1 **John William Chvilicek**  
 Debtor 2 **Gayle Marie Chvilicek**

Case number (if known) **19-60131**

property  
 securing debt:

☐ Retain the property and [explain]:

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases**

**Will the lease be assumed?**

Lessor's name:

☐ No

Description of leased  
 Property:

☐ Yes

Lessor's name:

☐ No

Description of leased  
 Property:

☐ Yes

Lessor's name:

☐ No

Description of leased  
 Property:

☐ Yes

Lessor's name:

☐ No

Description of leased  
 Property:

☐ Yes

Lessor's name:

☐ No

Description of leased  
 Property:

☐ Yes

Lessor's name:

☐ No

Description of leased  
 Property:

☐ Yes

Lessor's name:

☐ No

Description of leased  
 Property:

☐ Yes

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

**X** /s/ John William Chvilicek

**John William Chvilicek**

Signature of Debtor 1

**X** /s/ Gayle Marie Chvilicek

**Gayle Marie Chvilicek**

Signature of Debtor 2

Date **June 15, 2019**

Date **June 15, 2019**

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY under penalty of perjury that on June 17, 2019, pursuant to Rule 1007(b)(2) F.R.B.P., I electronically filed the foregoing *Statement of Intention* with the Clerk of the Bankruptcy Court using the CM/ECF system, which will automatically send e-mail notification to the Case Trustee, the U.S. Trustee, all counsel of record and all individuals and/or entities requesting special notice electronically.

I ALSO HEREBY CERTIFY under penalty of perjury that on the same date stated above, I mailed by first-class U.S. mail, postage prepaid, a copy of the foregoing to:

Select Portfolio Servicing, Inc  
Attn: Bankruptcy  
PO Box 65250  
Salt Lake City, UT 84165-0000

Wells Fargo Bank, NA  
dba Wells Fargo Auto  
PO Box 130000  
Raleigh, NC 27605

/s/ Kelsey J. Pelczar  
Kelsey J. Pelczar